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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	TION: Agaia,Inc.		
DOCUMENT NUMBE	DOGOOOGS664		
The enclosed Articles of	Amendment and fee are sub-	nitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
A	andrew Obeidy		
_		Name of Contact Person	
A	ngaia,Inc.		
_		Finn/ Company	-
2	00E.BrowardBlvd.Suite11	50	
_		Address	
F	Fort LauderdaleFL 33301		
_		City/ State and Zip Code	
andrev	w@agaiainc.com		
	E-mail address: (to be use	d for future annual report i	notification)
For further information	concerning this matter, please	call: at (954	366-7200
	Contact Person	at (	_)le & Daytime Telephone Number
Name of	Contact Person	Area Coc	ie & Daytime Telephone Number
Enclosed is a check for	the following amount made pa	yable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fec Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. I	ng Address idment Section ion of Corporations Box 6327 nassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

## Price ( ) | Price ( ) |

## Articles of Amendment to Articles of Incorporation of

16 HAY -6 AH 11: 29

Agaia,Inc.		SECULTA TO DESCRIPTION OF THE TAXABLE AND THE TENTON
( <u>Name c</u>	of Corporation as currently	filed with the Florida Dept. of State)
209000062664		
	(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this F	Florida Profit Corporation adopts the following amendmen
A. If amending name, enter the new na	ıme of the corporation:	
Not Applicable		The new
	ation "Corp," "Inc," or "C	"," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
		Not Applicable
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		
	·	· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of		Not Applicable
D. If we let all the let		
<ol> <li>If amending the registered agent an new registered agent and/or the nev</li> </ol>		
	Not Applicable	
Name of New Registered Agent		
	(PI 1)	
	(Florida stre	et address)
New Registered Office Address:		, Florida,
	(	City) (Zip Code)
New Registered Agent's Signature, if c		(City) (Zip Code)
		ith and accept the obligations of the position.
	Signature of New Re	egistered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	D	BenjaminShell	200E BrowardBlvd. Suite1150
Add			Fort Lauderdale FL 33301
X Remove			
2) Change	CEO	Mike Linn	200 E BrowardBlvd. Suite1150
x Add		****	Fort Lauderdale FL 33301
Remove			•
3) Change	Р	Christopher Shell	200E BrowardBlvd. Suite1150
× Add			Fort LauderdaleFL 33301
Remove			
4) Change	VP	MatthewShell	200E BrowardBlvd. Suite1150
<u> </u>			Fort Lauderdale FL 33301
Remove			
5) Change	Т	BobLee	200E BrowardBlvd. Suite1150
x Add			Fort LauderdaleFL 33301
Remove			
	S	A. Andrew Obeidy	William Control of the Control of th
6) Change		A. Allulew Obeldy	
X Add			<u></u>
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Not Applicable
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
Not Applicable
· · · · · · · · · · · · · · · · · · ·

	Not Applicable	
The date of each amendment		_, if other than the
'date this document was signed		
Effective date if applicable:	Not Applicable	
<u> </u>	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date will me Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ad for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	<b>,</b> "	
	(voting group)	
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
May ! Dated	5, 2016	
	(1)[[1]	
Signature	CHACLE OF THE STATE OF THE STAT	<del>-</del>
	by a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
	pointed fiduciary by that fiduciary)	
•		
	BenjaminShell	
	(Typed or printed name of person signing)	
	Chairman	
	(Title of person signing)	